State of Hawaii DEPARTMENT OF LAND AND NATURAL RESOURCES Division of Aquatic Resources Honolulu, Hawaii 96813

September 26, 2008

Board of Land and Natural Resources Honolulu, Hawaii

Request for Approval of a Special Activity Permit for Dr. Michael E. Field of The United States Geological Survey, Pacific Science Center, and Designated Assistants

The applicant proposes to conduct activities relating to the placement of instruments on the off-shore ocean floor to measure wave speed, direction, and turbidity. This permit is required to allow the taking of samples of stony corals from 20 locations on Molokai to take core samples to study geologic processes that affect the health and sustainability of coral reefs in Hawaii. This permit represents Dr. Field's continuing work conducted over the past seven years. The Division of Aquatic Resources has reviewed this application and supports the efforts of Dr. Field's on his studies of Hawaiian reefs.

RECOMMENDATION:

"That the Board authorize and approve, with stated conditions, this Special Activity Permit for Dr. Michael E. Field, United States Geological Survey, Pacific Science Center."

Respectfully submitted,

DAN POLHEMUS

Administrator

APPROVED FOR SUBMITTAL:

ĽAURA H. THIELEN Chairperson

ITEM F-2

LINDA LINGLE





STATE OF HAWAII DEPARTMENT OF LAND AND NATURAL RESOURCES DIVISION OF AQUATIC RESOURCES 1151 PUNCHBOWL STREET, ROOM 330 HONOLULU, HAWAII 96813

June 13, 2008

LAURA H. THIELEN CHAIRPERSON BOARD OF LAND AND NATURAL RESOURCES COMMISSION ON WATER RESOURCE MANAGEMENT

RUSSELL Y. TSUJI FIRST DEPUTY

KEN C. KAWAHARA DEPUTY DIRECTOR - WATER

AQUATIC RESOURCES
BOATING AND OCEAN RECREATION
BUREAU OF CONVEYANCES
COMMISSION ON WATER RESOURCE MANAGEMENT
CONSERVATION AND LOASTAL LANDS
CONSERVATION AND RESOURCES ENFORCEMENT
ENGINEERING
FORESTRY AND WILDLIFE
HISTORIC PRESERVATION
KAHOOLAWE ISLAND RESERVE COMMISSION
LAND
STATE PARKS

STATE PARKS

PERMIT TO ENGAGE IN CERTAIN PROHIBITED ACTIVITIES IN THE WATERS OF THE STATE OF HAWAII PRO-2009-13

The Board of Land and Natural Resources hereby grants permission under the authority of Chapter 187A-6, Hawaii Revised Statutes, and all other applicable laws, to:

> Dr. Michael E. Field USGS Pacific Science Center 400 Natural Bridges Dr. Santa Cruz, CA 95060

> > Phone: (831) 427-4737

This permit allows the following activity in the waters of Molokai, Kauai, Lanai, Maui, Kahoolawe and the Big Island of Hawaii under the terms and conditions listed below:

- This permit allows the placement of scientific monitoring instruments, including pressure transducers, in the offshore waters of various Hawaiian Islands to measure waves, current velocity, direction and turbidity of the water. These instruments would be located on dead hardrock surface of the reef flat and in sand patches with weights. No fish or other marine organisms will be collected or impacted by this activity.
- Sampling of Porites lobata heads and Porite compressa fingers is permitted at no more than 20 locations on the Island of Molokai.
- Discretion shall be used to avoid conflict with divers, swimmers and others during the science project activities.
- This permit is not transferable or assignable and must be possessed at the activity site and made available for inspection on demand.

- 5. This permit does not by implication authorize the primary permittee or any designated assistant to engage in any other activity if in violation of any other State, Federal or County law, regulation or ordinance.
- 6. The permittee shall be responsible and accountable for all actions under this permit.
- 7. This permit shall be in effect for the period July 1, 2008 to June 30, 2009 for the activity specified.
- 8. Within one month of its expiration, the permittee must return this permit to the Division of Aquatic Resources with complete information of all activities done under this permit.
- 9. This permit does not in any way make the Board of Land and Natural Resources of the State of Hawaii or its employees liable for any claims of personal injury or property damage to the permittees which may occur while engaged in activities authorized under this permit; further, the permittees agree to hold the State harmless against any claims of personal injury, death, or property damage resulting from their activities.
- 10. The primary permittee or a designated assistant responsible for the field activities shall notify the Division of Conservation and Resources Enforcement at least 48 hours in advance of any field collecting activity and provide such information as: location; date; time; and number of persons to be involved.

 Telephone Honolulu 587-0077; Maui 984-8110; Hawaii 974-6208; Lanai 565-7916; Kauai 274-3521 or Molokai 553-5190.

LAURA H. THIELEN, Chairperson Board of Land and Natural Resources

cc:

- (x) DOCARE
- (x) DAR Molokai
- (x) DAR Maui
- (x) DAR Hawaii
- (x) DAR Kauai

PERMIT TO ENGAGE IN CERTAIN PROHIBITED ACTIVITIES IN THE WATERS OF THE STATE OF HAWAII

SIGNATURE AND ACKNOWLEDGEMENT

By my signature below, I attest that I understand the conditions (Nos. 1 to 10) on the "Permit to Engage in Certain Prohibited Activities in the waters of the State of Hawaii; further, I agree to abide by all of the terms and conditions while conducting collecting activities under authority of this permit.

PRINCIPAL PERMITTEE:

MICHAEL E. FIELD	
DESIGNATED ASSISTANTS:	1
Signature: Susan A Cochran Print Name: Susan A Cochran	Signature: HANK CHEZAR
Signature: AMW DRAUT	Signature: 15 mes E. Luis Print Name: Tom REISS
Signature: ANN E GISS	Signature: ANDREA OGSTON
Signature: Lin Dimer Print Name ERIC GROSSMAN	Signature:Print Name
Signature: Shu B Lagar Print Name: Joshua B LOGAN	Signature: Print Name:
Signature: M. K. C. P. S. TO Print Name: M. KATHERINE PRESTO	Signature:Print Name:
Signature: Mancy Prouty Print Name: NANCY Prouty	Signature: Print Name:
Signature: Print Name:	Signature: Print Name:

ATTACHMENT TO SPECIAL ACTIVITY PERMIT NO. PRO-2009-13

FOR DESIGNATED ASSISTANTS ONLY

Primary Permittees: MICHAEL E. FIELDS

I, being the primary permittee, hereby acknowledge the attachment of additional designated assistants to my Special Activity Permit No. PRO-2009-13

Michael E. Fields

Date:	
ADDITIONAL DESIGNATED ASSISTANT I have read, understand and her stipulated in Special Activity	ceby agree to the conditions
Signature:	Signature:
Print Name:	Print Name:
Signature: Print Name:	Signature:Print Name:
Signature:	Signature:
Print Name:	Print Name:
Signature:	Signature:
Print Name:	Print Name:
Signature:	Signature:
Print Name:	Print Name: